

Billings Area Injury Prevention Newsletter

Billings Area Indian Health Service

April-June 2009 Edition

Volume 3, Issue 2

Indian Health Service Injury Prevention Program Development Fellowship Class of 2008 Graduates From Year Long Fellowship Course in Rockville, MD



Pictured (front row) l-r: Nancy Bill, Principle Injury Prevention Program Manager; Robin Lee, Fleurette Brown-Edison, Toni Short, Janelle Trotter, Jason Hymer. Pictured (back row) l-r: Darcy Merchant, Mary Robertson-Begay, Amy Cozad, Lyndon Endischiee, and Dr. Lawrence Berger, Injury Prevention Fellowship Director .

Photo courtesy of Nancy Bill

"INJURIES ARE PREVENTABLE!"

In this issue:

IHS Injury Prevention Fellowship Graduates	Pg. 1-4
Area Wide News	Pgs. 4-6
National Health & Wellness Observance Calendar	Pg. 5-6
State of MT News	Pg. 7
Announcements	Pg. 4
Safety Spotlight	Pg. 8
Contact Information	Pg. 9

Injury Prevention Links

Indian Health Service



IHS.gov

Indian Health Service, Injury Prevention Program



[IHS Injury Prevention Program](#)

Centers for Disease Control and Prevention



cdc.gov

CDC- Injury, Violence, and Safety



[Injury, Violence, Safety website](#)

May 2009- The Indian Health Service (IHS) Injury Prevention (IP) Program Development Fellowship Class of 2008 graduated from a year long fellowship by conducting final presentations to a nationwide audience in Rockville, MD on May 7th, 2009.

The IP Program Development Fellowship is a 12-month advanced learning experience for individuals promoting injury prevention in American Indian/Alaska Native communities. It combines course work, hands-on experiences, assistance from injury prevention experts, and completion of a community injury prevention project.

Below is a list of names and project descriptions for the graduating IHS IP Program Development Fellowship Class of 2008:

-Amy Cozad, Kiowa Tribe, Carnegie, OK; Kiowa Tribal member- Saving the Next Generations: Zuni Life Skills Curriculum for Youth in Oklahoma.



Introduction: Youth suicide for ages 10-24 is the second leading cause of death in the state of Oklahoma. Among youth ages 10-24, the suicide death rate for Oklahoma's Native Americans is 50% higher than the rate for U.S. All Races (10.5 vs. 7.0 per 100,000). Because the Zuni Life Skills Curriculum is recommended as an effective suicide-prevention approach, I sought to introduce the curriculum into four schools in rural Okla-

homa.

Methods: The Zuni life Skills curriculum was described to principals and school counselors at four local high schools. At the two schools that agreed to participate, the counselors were asked to identify students at high-risk of self-destructive behavior based on a referral form I developed. The life Skills sessions was two hours long and focused on problem-solving, coping skills, and other approaches to help teens deal with stressful life events. They took place one day a week for five months. Sign-in sheets were used to verify attendance. To evaluate the impact of the curriculum, the Columbia "TeenScreen" was administered: each student was asked to give a presentation of 101 "I am" statements; and feedback from school counselors was obtained.

Results and Discussion: The program had to be adapted to the needs of each school. For example, participation was voluntary and incentives were offered. The baseline Teen Screen was completed by all 30 students; follow-up results are pending. The results of the program were well-received by both students and school counselors. The long-term goal is to have the life Skills sessions incorporated into the regular school curriculum.

Fleurette Brown-Edison, Many Farms OEHE, Many Farms, AZ; Navajo Tribal member- "Ocean" in the desert: Reducing the deadly impact of hairspray abuse.

Please see article on page 2...

Continued from page 1.

In a Native American community in Arizona, chronic alcoholics are consuming a mixture of hairspray and water locally known as "ocean." I sought to learn more about the correlation between ocean use and alcohol deaths and injuries in the community. I analyzed data from the Indian Health Service Injury Data Surveillance System for ICO-S poisoning codes over 4 years. I also made observations at retail locations and counted empty hairspray cans to identify the most frequently-used brands and sizes. From 2003 to 2006, there were 74 cases of ethanol poisoning in the community. Seventeen people died and 57 people were hospitalized. Of the total cases, 21% involved ocean use. Large collections of empty hairspray products were concentrated close to three retail stores carrying varieties of hairspray products. I observed many ocean users asking customers in the stores' parking lots to purchase hairspray for them. The leading brand of hairspray used to make ocean was Suave maximum hold 8, followed by Rave maximum hold Rain. The majority of cans were eight ounces in size. Based on medical chart reviews and interviews with substance abuse counselors, most ocean users had a history of alcohol abuse, and were males between 35 -50 years old. They consumed ocean because it was cheaper and more accessible than beverage alcohol products. Approaches likely to reduce ocean abuse are developing an ordinance restricting the re-sale of hairspray; imposing higher taxes on hairspray; and providing more behavioral health and substance abuse treatment services.

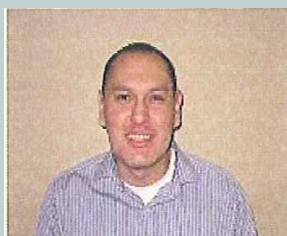
-Darcy Merchant, Billings Area OEHE, Injury Prevention, Billings, MT; Crow and Blackfeet Tribal member – The Crow Tribe Motor Vehicle Crash Site Identification Project.

Background/Objectives: Motor Vehicle Crashes (MVCs) are one of the leading cause of death for American Indian/ Alaska Natives (AI/AN) ages 1-44 residing in Montana. MVC injury mortality rates for AI/ANs are disproportionately higher than rates for other races. The huge expanse of roadways on the Crow Indian Reservation in south-central Montana are very challenging to drivers. My purpose was to use Geographic Information Systems (GIS) spatial analysis to understand factors involved in MVCs occurring on the Crow Indian Reservation.

Methods: Crow Tribal Legislative approval for this project was obtained in July 2008 as a joint action resolution, Montana Highway Patrol's (MHP) MVC datasets for 1996-2007 and the Crow Tribal Law Enforcement's MVC Police Reports for 2006-2008 were researched to identify MVCs resulting in injuries and/or deaths. I used a handheld Global Positioning System (GPS) device to locate and plot MVCs in the field. GPS points, and associated MHP datasets and Crow Tribal MVC police reports were subsequently synced, cross-referenced, edited, and entered into the Environmental Systems Research Institute's (ESRI) GIS software called ArcView, version 9.2.

Results: Spatial analysis of the maps generated over 538 severe MVCs with 74 fatalities and 868 injuries, There were thirty seven major MVC cluster sites throughout the reservation.

Conclusions: My next steps are to identify risk factors (such as alcohol involvement) for each crash site based on my data and to



conduct on-site investigations to identify environmental factors (curves, poor signage, domestic animal crashes, etc.). Results will be presented to Crow Tribal Officials, Crow Tribal Law Enforcement, and the Montana Department of Transportation.

-Janelle Trottier, IHS Office of Medical Care, Aberdeen, SD; turtle Mountain Band of Chippewa-Taking Back our Communities: Gang Prevention Strategies for Tribal Communities.

Gang violence is a growing concern in tribal communities, as well as nationally. My experience as the chair of a community task force to address gang violence in a rural American Indian reservation convinced me of the need to develop resources for tribes to address this serious issue.

I worked with our Area Behavioral Health Program to develop a tool kit to include an 8 minute trigger video and 18 minute training video entitled "Gang Prevention Strategies for Tribal Communities." A professional media company was hired to film, edit, produce and distribute the DVD. I developed the training videos based on my experience as the Chairperson for a Tribal Gang Reduction through Intervention, Prevention and Suppression (G.R.I.P.S) Task Force for 3 years: a review of the literature; and interviews with 9 key informants. Focus groups were conducted to improve the content, music, and graphics of the DVD.

The purpose of the trigger video is to stimulate discussion at community and professional presentations. The longer training video provides details about our 3 key messages: gangs are a serious problem in many tribal communities, effective strategies for reducing gang violence, and resources available. Statistics from one tribal community that had implemented the G.R.I.P.S. model showed a 10-30% decrease in their Juvenile Court records for simple assaults, disorderly conduct, truancy, vandalism and other crimes,

The DVDs and training materials will assist other communities in addressing gang violence through implementation of the Gang Reduction through Intervention, Prevention, and Suppression model.

-Jason Hymer, Norton Sound Health Corporation, Nome, AK; Suicide Intervention Training Rural Alaska.

Introduction: The suicide rate among Alaska Native people living in the Northwest region of Alaska is eight times the national average. The stigma surrounding suicide and lack of training in suicide prevention among healthcare providers in the region make it difficult to discuss and intervene with a person at risk of suicide.

Methods: The Applied Suicide Intervention Skills Training (ASIST) is an evidence based suicide intervention training developed by Living Works Education. Three injury prevention specialists from the Alaska Tribal Health System attended a week-long ASIST train-the-trainer workshop. Four ASIST trainings were subsequently held in northwest Alaska between October 2008 and April 2008. Evaluation data were gathered from a standardized post-course evaluation tool and a follow-up survey of participants.

Results: By having ASIST trainers in the Alaska Tribal Health System, the cost of an ASIST workshop was lowered significantly.



Please see article on page 3...

Continued from page 3.

Seventy five individuals attended the ASIST workshops, representing regional healthcare providers, social workers, teachers, and counselors. After completing the workshop, participants reported they felt better prepared to help a person at risk of suicide

Conclusion: Reducing stigma and increasing skills about how to help those at risk of suicide are essential for suicide prevention in rural Alaska. By lowering the cost of ASIST, this intervention training is more accessible to rural regions of Alaska. Interest in ASIST workshops has increased, as shown by requests for additional workshops. I will continue to complete 3-6 month follow-up surveys of participants. It will take time to find out if ASIST is saving lives, but it is already changing lives.

-Lyndon Endischee, Tuba City RHCC, Tuba City, AZ; Navajo Tribal member-Improve ATV Safety on Navajo Land.

Introduction: On June 1, 2008, I was a victim of an All-Terrain-Vehicle (ATV) crash that changed my life. I remember my doctor saying "you're lucky you were wearing your helmet, because we can fix anything below the neck, not the brain." The goal of my project changed to improve ATV safety on the Navajo Nation.

Methods: ATV crash data was collected from the Arizona State Trauma Registry, Consumer Product Safety Commission, Tuba City Regional Health Care Corporation Emergency Room, and Contract Health Services. Community surveys, focus groups, and helmet observations were conducted. Intervention strategies and draft ATV legislation were developed in collaboration with the Tuba City Injury Prevention Coalition to be presented to the Navajo Nation Tribal Council to amend Title 14 of the Navajo Nation Motor Vehicle Law.

Results: Observations of ATV riders in the Tuba City Service Unit revealed only 20% of riders wear helmets. Drivers are as young as 6 years old. The survey of community members showed 88% in favor of a Navajo Nation ATV law. The ATV resolution is scheduled to be voted on by the Tribal Council during its summer session.

Conclusion: An ATV law is needed on the Navajo Nation to prevent traumatic brain injuries or death. Future steps will be to expand the law for all ages, sponsor trainings for ATV riders including incentives for completing the training, and make helmets readily available.

-Mary Robertson-Begay, Hardrock Council on SA, Kykotsmovi, AZ; Navajo Tribal member-Driving Under the Influence of Alcohol.

Background: Unintentional injuries are a leading cause of death in Native American communities. Hardrock Chapter, population 1,250, located in northeast Arizona, is no exception. From 2006 to 2008, 14 alcohol-related motor vehicle crashes were documented; three were fatalities. For a small rural community, three was much too large a number.

Methods: An educational DVD with stories of how drinking and driving made an impact on the lives of several community members was created. The DVD is a basis for community presentations,

trainings, and data collection. Each participant receives a copy of the DVD in the hope that they will share it with family members. Although understaffed and 65 miles away, Navajo Nation law enforcement conducted two sobriety checkpoints. These resulted in three DUI arrests and two citations for no car seat. Car seats for children up to age eight were obtained and distributed.

Results: Fifty-six people have attended seven presentations. They included community members, behavioral health specialists, law enforcement officers, and students. Results of a questionnaire given at the end of the presentations indicated that many participants plan to use seatbelts and avoid driving under the influence of alcohol and/or other substances.

Conclusion: Education on the prevention of drinking and driving will continue through presentations and trainings. The Navajo Nation law enforcement will continue to help with sobriety checkpoints and partnership. Our work at the Hardrock Injury Prevention Program will continue as long as we have family, friends, and acquaintances that drink and drive.

-Robin Lee, Winnebago Hospital, Aberdeen, SD; Yankton Sioux Tribal member-The Journey Home: A Hospital-Based, Case Management Approach to Suicide Prevention.

Introduction: In 2008, 46 community members were treated in the Winnebago emergency room for suicide attempts, gestures, and/or suicidal ideations. As Director of Nursing at the hospital, my objective was to prevent future suicide attempts among these patients by implementing a case management approach.

Methods: A case management team was formed with representatives from hospital and public health nursing, the emergency room, behavioral health, Social Services, and the Clinical Director. Meetings were held at four behavioral health units where patients are referred for care, and with the Tribal attorney and Tribal health director, I reviewed medical record procedures for documenting suicide attempts.

Results: The team identified multiple problems: not acquiring medical information from referral agencies; absence of accurate RPMS data; only one social worker; lack of access to long-term psychiatric and substance services; unfamiliarity of providers and local police with the emergency protective custody process; inability of Tribal attorneys to advocate for involuntary commitment; and varying admission requirements at referral units. The team developed a chart review tool for case management and quality assessment. Alcohol or substance abuse issues were present for almost all suicidal patients. Revised policies and procedures have been approved. Patient care rounds are now held where staff reports who is transported out of hospital for social worker follow-up. Meetings are planned with our IT team to resolve data issues; and with the chief of police and tribal attorney to address legal issues in obtaining services.

Conclusion: The greatest barriers to comprehensive care for suicide attempters are the need for additional social workers; and a desperate scarcity of psychiatric, alcohol, and substance abuse services.

-Toni Short, Caddo Nation of Oklahoma, Binger, OK; Dare to Make a Difference: Prevention of Alcohol Use Among Our Youth.

Please see article on page 4...

Continued from page 3.

Background: Underage drinking among youth is a significant public health problem in the rural areas in Caddo County, Oklahoma and across the United States. From 2003-2007, there were 63 total Motor Vehicle Crashes (MVCs) involving drivers under age 21 in Caddo County alone.



Methods: Data were collected and summarized from the Oklahoma Highway Safety Office, Anadarko Police Department, and Anadarko High School. An underage drinking task force was formed at the Anadarko High School, which has partnered with local law enforcement to understand and conduct effective strategies to prevent underage drinking in the community.

Results: Task force members completed several activities. First, they officially established a 2Much2lose (2M2L) club with selected officers and held monthly meetings with the aim of changing social norms through policy changes, the media, and training law enforcement and youth in alcohol reduction techniques. Next, the task force received training for and conducted compliance checks at local liquor establishments. In addition to conducting a survey to assess use, access to, and perceptions of risk/harm/consequences regarding alcohol, the task force worked very hard to propose to have the town of Anadarko adopt a Social Host Ordinance, and in doing so, presented to city officials the ordinance's purpose as a tool to combat underage drinking.

Conclusions: The formation of the Anadarko youth task force has lead to youth empowerment through peer to peer capacity building activities. These have also created community support and endorsement of underage drinking prevention policies and inter-departmental collaboration, which will promote long-term change in social norms regarding underage drinking in Tribal communities surrounding Anadarko, Oklahoma.



For more information on the IHS IP Program Development Fellowship please contact Nancy Bill, Principle IHS IP Program Manager at 301-443-0105 or Dr. Larry Berger, IHS IP Program Development Curriculum Director at 505-275-3153.

Events, Schedules, & Announcements

July 2009

July 2009– Indian Health Summit-Celebrating the Tapestry of Health and Wellness: Sharing Wisdom and Showcasing Innovation will take place July 7-9 at the Hyatt Regency Hotel in Denver, CO. Please [click here](#) for more information.

August 2009

August 2009– A Native American National Highway Transportation Safety Administration, Child Passenger Safety Technician Training will be held in Billings, MT at the Hampton Inn on August 11th-14th, 2009. The course is sponsored by the Billings Area Indian Health Service, Injury Prevention Program and is hosted by Healthy Mothers/Healthy Babies of Montana. To register for this course please contact Darcy Merchant, Assistant

Injury Prevention Specialist, at 406-247-7097 before July 17th, 2009.

August 2009– Essentials of Healthy Housing Course will be offered on August 11th-12th, 2009 at Rocky Mountain College. Register online before July 17th, 2009 at www.ehsc.ihs.gov

September 2009

September 2009– An Intermediate Injury Prevention Course will be held in Fargo, ND on September 15th-18th, 2009. Please register at www.ehsc.ihs.gov for more information.



Area Wide News and Events

Blackfeet Service Unit, June 2009– The Third Annual Blackfeet Fire and Injury Prevention Community Fair kicked off its event this past June 26th, 2009. The event was sponsored and coordinated by Freda Heavy Runner of the Blackfeet Indian Health Service, as well as other Tribal programs. The event was another success and brought in numerous program booths promoting injury prevention and fire safety. Several hundred community members attended the event and marked the beginning of the summer season where injuries from fireworks and motor vehicle crashes happen at higher rates.



Highlights from the event brought in a number of injury prevention activities. The Bureau of Indian Affairs, Office of Justice Services in conjunction with the Billings Area Indian Health Service, Injury Prevention Program provided the SIDNE DUI go kart simulator of



which was demonstrated by multiple community members.

Other activities utilized by community members included Bucklebear and Smokey the Bear mascots who championed motor vehicle occupant safety and wildfire prevention. The Blackfeet IHS Injury Prevention Program sponsored a bike rodeo that teaches hands-on education to parents and children on the proper helmet selection and use. In addition, the bike rodeo runs the young participants through a bike safety course that teaches proper roadway navigation and bicycle balance.





The National Wellness Institute

2009

Health & Wellness
Observances Calendar

July 2009

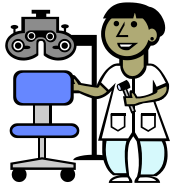
Fireworks Safety Months, June/July

fireworksafety.com



Eye Injury Prevention Month

preventblindness.org



August 2009

Medical Alert Awareness Month

medicalert.org



September 2009

Baby Safety Awareness Month

jpma.org



Area Wide News and Events

Honoring the Circle and Sober Behind the Wheel: A Presentation for Teen Drivers 2009 Event Brings Message to Local Schools

April 2009– The Billings Area Indian Health Service (IHS), Injury Prevention Program; Bureau of Indian Affairs (BIA), Office of Justice Services; and the Montana Department of Transportation Native Traffic Safety Bureau's Safe On All Roads (SOAR) teamed up with local high schools, county law enforcement, the Montana Highway Patrol, and other organizations to provide a campaign entitled "Honoring the Circle and Sober Behind the Wheel: A Presentation for Teen Drivers 2009" to high schools located on the Crow, Northern Cheyenne, and Fort Peck Indian Reservations this past April 2009.

The overall purpose of these presentations is to reduce impaired driving and increase seat belt usage among teen drivers at these participating reservation communities. The BIA, Office of Justice Services has trained officers in an impaired driving simulation designed for high school students. A battery-powered go kart called the Simulated Impaired Driving Experience (SIDNE) and "fatal vision" goggles are used for individual students to experience an interactive message about the effects of alcohol. The course for the driving experience can be set up indoors or out.

The Billings Area Indian Health Service Injury Prevention program and IHS Service Unit Injury Prevention Coordinators on these three reservations along with the Montana Department of Transportation's Native American Traffic Safety Program and its coordinators on six reservations, helped to set up effective presentations to student assemblies. The combined presentation included the impaired driving simulation followed by local speakers and testimonials.

Fort Peck Service Unit, April 2009-

On April 23, 24, 2009 presentations were conducted on the Fort Peck Reservation at these two High Schools: Wolf Point High School and Poplar High School. The title of the presentation was "Honoring the Circle and Sober Behind the Wheel: A presentation for Teen Drivers 2009" with the target audience being teen drivers.

This event was made possible by the Bureau of Indian Affairs, Safe On All Roads, and the Billings Area Indian Health Service, Injury Prevention Program. The message was presented to 239 students in Wolf Point on April 23, 2009 and to 198 students at the Poplar High School on April 24, 2009.



This event could not have been possible without the collaborative effort between the schools and the people and agencies mentioned next: Montana Highway Patrol Officers: Derek Werner, Rick Kessner, and Ross Tuggle; North Eastern Montana Health Services, EMT's Ginny Muntz and Jean Marmon; Safe On All Roads representatives Marty Reum and Ron Jackson; Center for Native Health Partnerships, Montana State University; Roosevelt County Officers Ed Tapaha and LaVern White Bear; Environmental Prevention Program Officer Melissa Buckles; Crow Nation Traffic Safety Officer Gary Johnson II; Billings Area Indian Health Service, Injury Prevention, Darcy Merchant; Ft. Peck Tribes Injury Prevention, Adrian Spotted Bird Jr.; and local Youth Speaker Darek LeMay.



Pictured above: Sponsors and presenters for Honoring the Circle and Sober Behind the Wheel at Poplar High School

Thank you all for making this possible. The message was clear, don't drink and drive and make better decisions when getting behind the wheel. The go kart presentations was not possible due to weather conditions, however, the photo's and testimonials had a huge impact on the students and their outlook of what could happen if they are not responsible when turning that ignition key of the car they are sitting in. **Article submitted by Adrian Spotted Bird, Ft. Peck IP Coordinator, 406-768-5322.**

Article continued on page 6...



September 2009

National Food Safety Education Month

servsafe.com



National Childhood Injury Prevention Week (September 1-7)

safekids.org



National Suicide Prevention Week (September 6-12)

suicidology.org

National Farm Safety and Health Week (September 21-27)

ncs.org



Area Wide News and Events

Honoring the Circle and Sober Behind the Wheel, continued from page 2.

Fort Belknap Service Unit, April 2009-

Avis Spencer and I went out to the Hays Lodge Pole High School with the BIA SIDNE (Simulated Impaired Driving Experience) vehicle. Randy Elliott, a BIA Officer from the Northern Cheyenne Reservation, was the instructor for the hands-on simulation.



Pictured above: Students listen to a local speaker for Honoring the Circle and Sober Behind the Wheel Campaign in Fort Belknap.

We had over 90 students drive the vehicle around a small obstacle course. The officer would then have control of the vehicle to simulate a drunk driver. There was also the EMT's from Fort Belknap Service Unit and the Local Police Department at the event.

Article submitted by Stan Zander, Jr., Ft. Belknap IP Coordinator, 406-353-3165.

Crow and Northern Cheyenne Service Units, April 2009- The Honoring the Circle and Sober Behind the Wheel: A Presentation for Teen Drivers 2009 was given to Plenty Coups High School in Pryor, MT and Busby High School located in Busby, MT.



Pictured above (l-r) Pete Molina; Darcy Merchant, and Randy Elliott help local high school students with the SIDNE Go Kart.

Crow Highway Safety Officer Gary Johnson gave a powerful presentation on the deadly consequences of impaired driving to students at both high schools. Several hundred students attended the presentations.



Bureau of Indian Affairs Officer Randy Elliott performed the SIDNE go kart to the students. Mr. Elliott began the event by asking students who had valid drivers licenses in the crowd. He talked to the students about the consequences of obtaining a DUI offense and how it would impact their chances for future work and driving privileges. A second physical activity the law enforcement officers utilized was the FATAL Vision Goggles which are used to simulate the impaired vision portion of alcohol intoxication. Undersheriff Pete Molina and Officer Gary Johnson administered the activity to the students.



The Billings Area Indian Health Service, Injury Prevention Program would like to thank all those involved in this year's presentations. Officers Johnson and Elliott, and Big Horn County Undersheriff Pete Molina demonstrated immeasurable commitment and effort to bring these resources and messages to the students.

The Billings Area Indian Health Service, Injury Prevention program would also like to thank the Big Horn County DUI Task Force Coordinator, Mark Humphrey for his dedication and commitment to help plan these events and to reduce injuries and fatalities from alcohol-related crashes for these target populations.

For more information on bringing these presentations and the SIDNE go kart to your high school or tribal college, please call Darcy Merchant at 406-247-7097 or Darcy.Merchant@ihs.gov



State of Montana News & Events

Safe On All Roads Update

Montana Department of Transportation Native American Traffic Safety
June 2009-

2008 Native American deaths were fewer

The SOAR program's community outreach on Indian reservations in Montana is one of the strategies the Montana Department of Transportation has in place to reduce Native American traffic deaths and injuries. The program's objective's are to prevent impaired driving and increase seat belt use by working with local coordinators and partnerships.

The Montana Department of Transportation recently announced that crash deaths among Native Americans in Montana in 2008 were less than twelve percent of all fatalities. The number reflects a decrease of 37 percent over the previous year. American Indians comprise about 6.3 percent of the population in Montana, but historically, they have represented about fourteen to twenty percent of the motor vehicle crash fatalities in the state.

American Indian fatalities in Montana were down for the second year. (Montana Department of Transportation.)

2006 fatalities = 46

2007 fatalities = 43

2008 fatalities = 27

"Sixteen fewer Indian lives were lost on the roadways in 2008, compared to the previous year," said Montana Department of Transportation Director Jim Lynch. "One year doesn't make a trend, but the numbers are moving in the right direction." The number of fatalities from 1995 to 2007 has averaged 40 Native Americans per year in Montana.

Winners announced in Safe On All Roads radio contest

Students from Frazer School, Brockton High School, Box Elder High School and Arlee High School were among the top scorers in the Montana Department of Transportation-sponsored contest for traffic safety radio announcements. Students from reservation-area schools were invited to enter the contest either as individuals or groups. Their original work had to address either seat belt use or sober driving.

Frazer School was named the Grand Prize winner for an audio production promoting seat belt use. The school's Native American Studies teacher, Roger White, Jr., recorded the students' creation, titled "My relatives." Singers Rhea Smoker, Josie White and Donell Smoker were accompanied by Justin White on flute. The high school students chose 3rd-grader Shaedell Adams to do the voice-over. The recorded spot began airing during the SOAR media campaign for Father's Day seat belt use.

Summer Powwows

Safe On All Roads materials will be distributed at several gatherings on reservations this summer. Information booths and parade entries will also help with public outreach for impaired driving prevention and seat belt use. Fort Peck Reservation events include:

Award presentation to Frazer School, Red Bottom Celebration, hand drum contests at Red Bottom, Wadopana and Poplar Indian Days. On the Blackfeet Reservation, SOAR is coordinating with Blackfeet Community College for a flag raising ceremony at the Blackfeet Medicine Wheel on July 10 in Browning. An award cere-

mony for two composers of round dance songs addressing traffic safety will be held July 23 in Fort Belknap, during Milk River Indian Days. SOAR will help sponsor a youth breakfast during the Arlee pow wow. For the Northern Cheyenne, local SOAR coordinators will have booths at the 4th of July and Labor Day powwows.

Summer Billboards

New artwork was posted in May at locations north of Polson, near East Glacier, between Poplar and Wolf Point and at Harlem.



Father's Day Seat Belt campaign

Our primary target audience for safety belt use is Native American men age 18 to 34. Father's Day is an ideal time to direct a seat belt message at this audience. Newspaper ads ran in mid-June on reservations in Montana.

A Good Dad Knows How To:

Catch a fish and catch a dream,
Read a kid's book and read a kid,
Build a campfire and build up a family.



And A Great Dad Knows:
To always buckle up.

Be a great dad. Happy Father's Day



New expansion

The Montana Department of Transportation is now seeking applicants for paid part-time positions coordinating SOAR program activities on the Crow Reservation and the Flathead Reservation. For more information, contact info@safeonallroads.com.

September 2009

A back-to-school seat belt campaign is planned.

Your input is welcome.

The number of local partners and support for the SOAR program continues to increase. We welcome the advice and comment of all those who share our objectives in Montana's Indian Country. Billings Area Indian Health Service is among those agencies who have helped the program enhance local partnerships and reach urban populations.

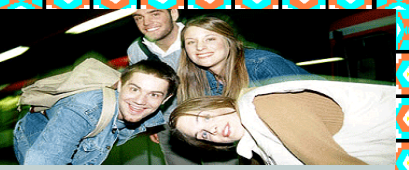
www.safeonallroads

Article submitted by Randi Szabo, Program Manager, Safe On All Roads, MT Dept. of Transportation, Native American Traffic Safety. For further questions or information, please call Randi Szabo at 406-454-3422, ext. 103.



Safety Spotlight:

Student Involvement



How to Stop a Friend From Driving Impaired

If a friend or someone you know has been drinking while at a party or "out on the town," they shouldn't drive, so please prevent them from doing so. Many people believe that coffee, a cold shower, or fresh air is all that's needed to overcome the effects of alcohol. In truth, time is the only way to get alcohol out of the system. If a friend of yours has been drinking, he or she shouldn't drive. There are steps you can take to keep a friend alive. ¹

1. Be proactive. Talk with your friends before they go out. Pick a designated driver or arrange for a sober driver to pick you up.
2. Politely, but firmly, tell them you cannot let them drive home because you care. The first time you do this will be the toughest, but your actions could save your friend's life or that of an innocent victim. ¹
3. Drive your friend home. To be sure your friend arrives home safely, you can drive him or her yourself, **if** you haven't also been drinking. ²
4. Have your friend sleep over. Asking a guest to sleep over is another good way to keep a friend from driving. You won't have to drive and your friend won't have to return the next day for the car. ²
5. Take the keys away. Here are some hints on how to get the keys from a drunken person before he or she can drive: ³

- ⇒ Be calm. Joke about it. Make light of it.
- ⇒ Make it clear that you're doing him a favor by taking their keys.
- ⇒ Find the keys while he is distracted and take them away. They'll probably think they've lost them and will be forced to let someone else drive.
- ⇒ If it is a close friend, be soft and calm. Speak to him or her privately and suggest that they let someone else drive.
- ⇒ If it is a good friend, spouse, or loved one,

refuse to get in the car with them. Tell him or her you will ride with someone else or walk.

- ⇒ If you don't know the person well, speak to their friends and ask them to help get the keys.
- ⇒ Do not embarrass the person or be confrontational.

Whatever you do, don't give in. ⁴ About one-third (32%) of persons of driving age have been with a friend who may have had too much to drink to drive safely, including half of those under age 30. Most of these (80%) tried to stop the friend from driving and were successful in preventing the impaired person from driving about 75% of the time. Friends don't let friends drink and then drive. In the morning, you'll have a safer, and maybe an even closer, friend. ⁵



Photo courtesy of Eugene Stump

Article submitted by Randi Szabo, Program Manager, Safe On All Roads, MT Dept. of Transportation, Native American Traffic Safety. For further questions or information, please call Randi Szabo at 406-454-3422, ext. 103.

References:

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Mission of the Indian Health Service

THE MISSION OF THE INDIAN HEALTH SERVICE IS TO RAISE THE PHYSICAL, MENTAL, SOCIAL, AND SPIRITUAL HEALTH OF AMERICAN INDIANS AND ALASKA NATIVES TO THE HIGHEST LEVEL.

THE GOAL TO ASSURE THAT COMPREHENSIVE, CULTURALLY ACCEPTABLE PERSONAL AND PUBLIC HEALTH SERVICES ARE AVAILABLE AND ACCESSIBLE TO AMERICAN INDIAN AND ALASKA NATIVE PEOPLE.

OUR FOUNDATION. TO UPHOLD THE FEDERAL GOVERNMENT'S OBLIGATION TO PROMOTE HEALTH FOR AMERICAN INDIAN AND ALASKA NATIVE PEOPLE, COMMUNITIES, AND CULTURES AND TO HONOR AND PROTECT THE INHERENT SOVEREIGN RIGHTS OF TRIBES.

Injury Prevention Program

OUR MISSION:

TO RAISE THE HEALTH STATUS OF AMERICAN INDIANS AND ALASKAN NATIVES TO THE HIGHEST POSSIBLE LEVEL BY DECREASING THE INCIDENCE OF SEVERE INJURIES AND DEATH TO THE LOWEST POSSIBLE LEVEL AND INCREASING THE ABILITY OF TRIBES TO ADDRESS THEIR INJURY PROBLEMS.



IHS Injury Prevention
Advocacy, Outreach and Results

Billings Area Injury Prevention
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